Effective on 1208/2004 Fees pursuant to the Consolidated Appropriations Act, 2005 (H R. 4818) FEE TRANSMITTAL for FY 2005				Complete if Known			
				Application Number P		CT/IB05/000079	
				Filing Date		01/11/05	
				First Named Inventor		istin S. Bryans	
10		2003		Examiner Name	U	nknown	
Applicant claims sma	li status. Se	e 37 CFR 1.27		Art Unit	·····	nknown	
Total Amount of Pay		(\$) 400.00		Afforney Decket N	o. P	C25784A	
METHOD OF PAYME	NT (check	all that apply)					
☐ Check ☐ Cree ☐ Deposit Account: E For the above iden ☐ Charge fee(s) is	eposit Acc tified depo	sit account, the D	16-1445	thorized to: (check	rge fee(s) indicated	Pfizer Inc	
⊠Charge any add fee(s) under 37 CF			yment of	goong	above-identified de dit any overpayment		
WARNING: Information an	lion on this d authoriza	form may become	public. Cred	dit card information	n should not be inclu	ded on this form	ı. Provide credit
FEE CALCULATION							
1. BASIC FILING FEE							
	FILING FEES Small Entity		SEA	ARCH FEES Small Entity		EXAMINATION FEES Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees paid
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES	3						
Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)						<u>Fee (\$)</u> 50 200	<u>Small Entity</u> <u>Fee (\$)</u> 25 100
Multiple dependent claim Total Claims	s 20 or HP≈	Extra Claims	Fee (\$)	Fee Paid	ź (\$)	360 <u>Multiple Der</u> Fee (\$)	180 pendent Claims Fee Paid(\$)
HP= highest number o	f total clair	ns paid for, if grea	ater than 20				
Indep. Claims	3 or HP≃	Extra Claims	Fee (\$)	Fee Paid	d (\$)		
HP= highest number o		ns paid for, if grea	ter than 3				
3. APPLICATION SIZE F	EE drawings FR 1.52(e)	exceed 100 sheel i), the application	ts of paper, size fee due	s is \$250 (\$125 for	nically filed sequence small entity) for ea)
Total Sheets	Extra Sheets Number of each additional 50 or fraction thereof fee (\$) 100= /50= (round up to a whole number) x						Fee Paid (\$)
4. OTHER FEE(S)							Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)							i ces Lain (3)
Other: Petition und			. ,				\$400.00
Cuhmittad							
Submitted Name (Printed/Type)	Andrea E.	Dorigo		Registration No. (Attorney Agent)	47,532	Telephone	1-212-733-1898
Signature	/Andrea (Dorigo/	······	(Danginsy Main)	L	†	

Signature (Andrea Congo)

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This objection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and for suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. 8ox 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. 8ox 1450, Alexandria, VA 22313-1450.